



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
STATE PUBLIC HEALTH LABORATORY
BREATH ALCOHOL PROGRAM

RECEIVED

By Carol Day at 8:32 am, May 28, 2014

INTOX EC/IR II MAINTENANCE REPORT

REPORT #3

Complete this report at the time of the regular monthly preventive maintenance check (not to exceed 35 days). Complete this report whenever the instrument is serviced or repaired and whenever it is placed into service. Retain the original and send a copy within 15 days to the Breath Alcohol Program, DHSS.

INTOX EC/IR II SN
12830

NAME OF AGENCY
Raymore Police Departmen

DATE OF INSPECTION
05/23/2014

LOCATION OF INSTRUMENT (STREET AND CITY)
100 Municipal Cir. Raymore

TIME OF INSPECTION
20:40 CDT

CHECKLIST: Place a mark in the box by each item if found to be satisfactory or is operating within established limits. (Write in observed values where determined). Unmarked items must be corrected before using instrument.

☒ **DIAGNOSTIC RECORD**

☒ BLANK CHECK

☒ CO2 CHECK

☒ FC 1 TEMP

☒ FLOW CHECK

☒ SRC TEMP

☒ FCB CHECK

☒ DET TEMP

☒ CRC COMP CHECK

☒ BT TEMP

☒ CRC CAL CHECK

☒ STD 2 TEMP

☒ PRINT TEST

☒ ETH CHECK

BREATH ANALYZER ACCURACY STANDARDS

☒ SIMULATOR SOLUTION

☐ COMPRESSED ETHANOL-GAS MIXTURE

☒ STANDARD SUPPLIER

Guth Laboratories

LOT# 14030

EXP. DATE 01/20/2016

☒ SIMULATOR TEMP (34°C \pm 0.2°C)

SIMULATOR S/N

SIMULATOR EXP DATE

34°C \pm .2°

SD2256

04/22/2015

☒ **CALIBRATION CHECK - (ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT)**

Run three tests using a standard solution. All three tests must be within \pm 5% of the standard value and must have a spread of .005 or less. Mark the box corresponding to the standard solution being used. (PRINTOUT ATTACHED)

☒ 0.10% STANDARD - MUST READ BETWEEN 0.095% AND 0.105% INCLUSIVE

☐ 0.08% STANDARD - MUST READ BETWEEN 0.076% AND 0.084% INCLUSIVE

☐ 0.04% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE

TEST 1 C_1 0.104 g/210L

TEST 2 C_2 0.104 g/210L

TEST 3 C_3 0.104 g/210L

INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT:

REFUSALS 0

0-.04 61

.05-.09 0

.10-.14 0

.15-.19 0

OVER .19 0

LIST ANY NEW PARTS AND DESCRIBE ANY ALTERATION OR MODIFICATION THAT WAS MADE TO RESTORE THE INSTRUMENT TO OPERATE SATISFACTORILY AND WITHIN ESTABLISHED LIMITS (USE OTHER SIDE IF NECESSARY).

Maintenance Test

INSPECTING OFFICER

SIGNATURE

Joshua B. Giacone #919

PRINT FULL NAME

GIACONE, JOSHUA

TYPE & PERMIT NUMBER

240201

EXPIRATION DATE

04/30/2016

TELEPHONE NUMBER

(816) 331-0530

RETURN COMPLETED REPORT TO THE:

Breath Alcohol Program, Missouri Department of Health and Senior Services,
Southeast District Office, 2875 James Blvd, Poplar Bluff, MO 63901



GUTH LABORATORIES, INC.

690 NORTH 87th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-564-5470

CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 14030 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on January 22, 2014, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1215% (w/vol) ethyl alcohol. The expiration date for this lot number is January 20, 2016 at 11:59 PM.

When used in a calibrated Simulator, operating at 34°C +/- .2°C, this solution will give a breath alcohol analysis instrument reading of 0.100 g/210L +/- 3%.

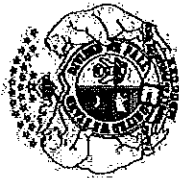
The alcohol and water used in this solution were free of test interfering substances.

Ted L. Pauley, President
GUTH LABORATORIES, INC.

NIST Traceability:

Testing was conducted using Cerilliant Reference Standard lot number FN122211-02 whose values are traceable to NIST.

All balances are calibrated annually by an outside agency using NIST traceable weights. Calibration verification is done prior to each use utilizing NIST traceable weights.



STATE OF MISSOURI
DEPARTMENT OF HEALTH AND SENIOR SERVICES
BREATH ALCOHOL PROGRAM



PERMIT
TYPE II

JOSHUA B GACONE

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field service and repairs, and operate the following breath analyzer(s):

ALCO-SENSOR IV WITH PRINTER, INTOX EC/IR II

for the determination of the alcoholic content of blood from a sample of expired air. Permit issued under the provisions of sections 577.020 through 577.041, RSMo and 306.111 through 306.119 RSMo.

DATE 4/30/2014

NUMBER 240201

EXPIRES 4/30/2016

MO 580-0771 (6-10)

W. W. S.

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

Darl Vesterly

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LAB-4 (RS-10)

Intox EC/IR-II: Calibration

Raymore Police Department 100 Municipal Cir. Raymore

Serial Number: 012830 Test Number: 139

Test Date: 05/23/2014 Test Time: 20:41 CDT

Operator's Name: GIACONE, JOSHUA

Operator's Permit #: 240201

Permit Expiration Date: 04/30/2016

Wet Gas Target: 0.100

Lot Number: 14030 Exp Date: 01/20/2016

System Check: Passed

Test	g/210L	Time
BLK	0.000	20:42
CAL	0.100	20:43

Success

Calibration CRC: 24D29816



Simulator Calibration Report

This calibration report is to certify the alcohol reference simulator listed below has been examined and tested using standards traceable to the National Institute of Standards and Technology (NIST) in accordance with the standards set by the Missouri Department of Health and Senior Services Rules and Regulations: 19CSR 25-30.051 (4).

Checked: 4/22/2014 Expires: 04/22/2015
Digital Therm. SN:094948
MSC Tech:DRL Temp:33.97
Agency: Raymore Police Dept
SD 2256



Technician Printed Name:

DAN LUCAS

Technician Signature:

[Handwritten Signature]

Date:

04/22/2014

Contact: Missouri Safety Center

Breath Alcohol Instrument Training Program

660-543-4834